

PATENT NUMBER

<p>O.I.P.E.</p> <p>SCANNED <u>613</u> Q.A. <u>RA</u></p>	<p>PATENT DATE</p>
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2005-0392

SECTOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
	424			<i>[Signature]</i>

FILED WITH: ☐ DISK (CRF) ☐ FICHE
(Attached in pocket on right inside flap)



ORIGINAL				CROSS REFERENCE(S)								
CLASS		SU JCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							
424		400		424	450	175.1						
INTERNATIONAL CLASSIFICATION				436	829							
A	6	1	K									


☐ Continued on Issue Slip Inside File Jacket

<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg. —	Figs. Drwg. —	Print Fig. —	Total Claims 7	Print Claim for O.G. 1
<input type="checkbox"/> a) The term of this patent subsequent to _____ (date) has been disclaimed.	Lakshmi Channarayana 7/13/05 (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
	THOMAS K. PAGE SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 1600 (Primary Examiner) (Date)			9/26/05	
<input type="checkbox"/> b) The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____	(Same as above)			ISSUE FEE	
	(Same as above)			Amount Due \$700	Date Paid
<input type="checkbox"/> c) The terminal ____ months of this patent have been disclaimed.	C. Belancourt 7-13-05 (Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER	

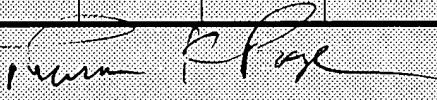
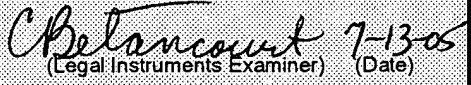
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(FACE)

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Issue Classification 	Application/Control No.	Applicant(s)/Patent under Reexamination	
	09/171,885	CUBICCIOTTI, ROGER S.	
	Examiner	Art Unit	
	Lakshmi S. Channavajjala	1615	

ISSUE CLASSIFICATION										
ORIGINAL					CROSS REFERENCE(S)					
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
424		400			424	450	175.1			
INTERNATIONAL CLASSIFICATION					436	829				
A	6	1	K	9/00						
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Lakshmi Channavajjala 7-13-05 (Assistant Examiner) (Date)		 THURMAN K. PAGE SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 1600 <small>(Primary Examiner) (Date)</small>	Total Claims Allowed: 7	
 <small>(Legal Instruments Examiner) (Date)</small>			O.G. Print Claim(s) 1	O.G. Print Fig.

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA										<input type="checkbox"/> T.D.										<input type="checkbox"/> R.1.47									
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